Attitudes of Family Physicians
Regarding the Use of Hospitalists for In-patient Care:
A Pilot Study

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Abstract. Introduction: Traditionally, family practice physicians have personally managed the care of their hospitalized patients. The changing healthcare marketplace, however, is stimulating changes in primary care physician practice. One change is the increased utilization of a new physician specialist known as the “hospitalist” to manage hospital in-patient care. The purpose of this study was to assess the frequency of family practitioners use of hospitalists, their level of satisfaction with the care provided by the hospitals and the degree to which increased utilization of hospitalists has affected their professional practice and their personal life. Methods: All physicians in Sedgwick County designated as family physicians were included in the study population. Results: A majority of respondents (76%) utilize hospitalists to manage the care of their hospitalized patients. Also, the majority of respondents (77%) agree that utilizing hospitalists to manage in-patient care increases their productivity and 70% reported that hospitalists improve the quality of care provided. Conclusion: Family physicians in Sedgwick County generally agree that utilizing hospitalist physicians improves their own personal productivity and also improves quality of care for their hospitalized patients.

1. Introduction

Healthcare providers are becoming more focused on reducing costs, increasing quality of care, and improving patient satisfaction with care. Over the past 10 years the role of the hospitalist has emerged as a new area of medical specialization to address these concerns. The hospitalist physician is a specialist that combines the roles of acute care sub-specialist and medical generalist in the hospital setting. They do not replace family or primary care physicians, surgeons or other specialists, rather they are concerned with managing hospital inpatients, from admission until discharge. Hospitalists are directly responsible for a patient's care in addition to coordinating the services of other providers involved in the patient’s care. They serve as generalists by coordinating diagnostic procedures, consultations with other specialists, and initiating treatment plans. Hospitalists facilitate the transition from pre-hospital care to in-patient care and then discharge treatment to follow-up.[1]

As of June 2004, there were 6000 US hospitalists practicing inpatient medicine in diverse settings including adult and children hospitals and skilled nursing facilities. According to the literature, the number of hospitalists in the US is projected to increase by almost 20,000 over the next 10 years.[2] The growth of this model is particularly affecting many family practitioners who traditionally followed their patients when they admitted them to the hospital. Today there is a growing trend for family physicians to use hospitalists to manage their inpatients.

The primary purpose of this study was to investigate the attitudes of family physicians regarding the role of hospitalists. Particular attention was given to exploring how family physicians rate the hospitalist's impact on the scope of family practice, quality of care and patients' satisfaction with hospitalist care.
2. Experiment, Results, Discussion, and Significance

Methodology
The study was administered through the Department of Physician Assistant at Wichita State University from July to August 2006. The survey instrument was designed to investigate the attitudes of family physicians concerning the use of hospitalists for the care of their hospitalized patients. It consisted of specific questions regarding how the role of hospitalist impacts their productivity, their scope of practice, and their personal life. In addition, recipients were asked to rate their satisfaction with hospitalists outcomes, quality of care and perceived patient satisfaction with care. A sample of 222 family/primary care practitioners was selected from a database maintained by the Medical Society of Sedgwick County, Wichita, Kansas. Sedgwick County is an urban area in Kansas with medical professionals that serve the south central and western regions of the state.

Results
Of the 222 surveys mailed, 124 (55.9%) were returned. The majority of the respondents (32.3%) characterized their practice as having 5-10 or more practitioners. Of the 124 respondents, 108 (87.1%) reported that they admit less than 5 patients to the hospital in an average week. 57.3% said they utilize a hospitalist to manage the care of their hospitalized patients and 19.4% said they use hospitalists in selected circumstances. When asked how they perceived their patients’ satisfaction with the care they receive from hospitalists, the majority (80.9%) said patients were generally satisfied. More than half of the physicians surveyed believed hospitalists improved the quality of care for their patients. 88.7% believe using hospitalists enables them to better manage their time, both personally and professionally.

Discussion
The majority of respondents to this survey utilize hospitalists for their in-patients’ care, irrespective of the number of physicians in their practices. More than half of the responding family physicians said they agree that hospitalists improve the quality of care for their hospitalized patients. Respondents generally agree that hospitalists allow them to increase their productivity in the office. The family practitioners that do not use hospitalists follow their own patients in the hospital or rotate hospital coverage with other physicians in their practice. The majority of respondents believe that communication with hospitalists is timely and effective. This result brings new information not previously available in the literature concerning the issue of communication between family physician and hospitalist. Existing literature suggests that poor communication leading to discontinuity of care is a key disadvantage of using hospitalists. Respondents to this survey challenge that belief.

3. Conclusion
Family physicians in Sedgwick County generally agree that utilizing hospitalist physicians improves their own personal productivity and also improves quality of care for their hospitalized patients. Physicians that use hospitalists are generally satisfied with the care of their patients. They also believe their patients are satisfied with the care they receive from hospitalists. The negative feelings toward the hospitalist model are most frequently seen in physicians who have never used it or are specialists with more inpatient than outpatient practice.[3]

Current studies address patients’ satisfaction of the hospitalists’ services from the opinion of the primary care physician or specialist. Further studies are needed to directly assess patients’ satisfaction with hospitalists.

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